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24339

7590

04/04/2007

JOEL D. SKINNER, JR.
 SKINNER AND ASSOCIATES
 212 COMMERCIAL ST.

HUDSON, WI 54016

07/05/2007 REFERENCE 00000022 10706793

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Joanne Rudrud (Depositor's name)
 Joanne Rudrud (Signature)
 7-5-07 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/706,793	11/12/2003	Charles D. Swerdlow	SWD200DIV	7163

TITLE OF INVENTION: DEFIBRILLATION SHOCK STRENGTH DETERMINATION TECHNOLOGY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$0	\$1000	07/05/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
EVANISKO, GEORGE ROBERT	3762	607-008000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 _____
 2 Skinner & Associates
 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
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- ☐ A check is enclosed.
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☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-2381 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

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SKINNER AND ASSOCIATES

240 Commercial Street
Hudson, Wisconsin 54016 USA
Tel.: 715-386-5800
FAX: 715-386-6177
Internet Email: info@skinnerlaw.com

INTELLECTUAL PROPERTY LAW
Patents-Copyrights-Trademarks

Joel D. Skinner, Jr. *+‡
Carol N. Skinner *+

* WI Bar / + MN Bar / ‡ Registered Patent Attorney

July 5, 2007

Mail Stop Issue Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Re: U.S. PATENT APPLICATION
Title: DEFIBRILLATION SHOCK STRENGTH DETERMINATION
TECHNOLOGY
Application No: 10/706,793
Filing Date: 11/12/2003
Attorney Docket: SWD200DIV
Group Art Unit: 3762
Confirmation No.: 7163

Dear Sir:

Enclosed for filing in the above-referenced case are:

1. Issue Fee Transmittal Form PTOL-85b.
2. Payment of \$ 1030.00 (Issue Fee: \$700.00, Publication Fee: \$300.00
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☐ By enclosed Check.
☒ By enclosed Credit Card Payment Form(s) PTO-2038.
3. Return Receipt Post Card
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Name

Signature

Joanne Rudrud
Joanne Rudrud

The Correspondence Address and Fee Address for this application and any patent issuing thereon is **CUSTOMER NUMBER 24339**.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'Jh', is written above a horizontal line.

Joel D. Skinner, Jr.

Reg. No. 33,786

Enclosures

cc: Dr. Charles Swerdlow (For Records)

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